

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Medical Review Division regarding a medical fee dispute between the requestor and the respondent named above.

I. DISPUTE

1. a. Whether there should be reimbursement for dates of service 12-18-01 and 12-19-01.
- b. Date of service 12-18-01 had been paid and has been withdrawn pursuant to fax dated 12-17-02.
- c. The request was received on 7-23-02.

II. EXHIBITS

1. Requestor, Exhibit I:
 - a. TWCC 60
 - b. HCFAs
 - c. EOBs
 - d. Medical Records
 - e. Any additional documentation submitted was considered, but has not been summarized because the documentation would not have affected the decision outcome.
2. Respondent, Exhibit II:
 - a. TWCC 60 and Response to a Request for Dispute Resolution
 - b. Any additional documentation submitted was considered, but has not been summarized because the documentation would not have affected the decision outcome.
3. Per Rule 133.307 (g) (3), the Division forwarded a copy of the requestor's 14 day response to the insurance carrier on 8-20-02. Per Rule 133.307 (g) (4) or (5), the carrier representative signed for the copy on 8-21-02. The response from the insurance carrier was received in the Division on 9-3-02. Based on 133.307 (i) the insurance carrier's response is timely.
4. Notice of letter requesting additional information by the Requestor is reflected as Exhibit III of the Commission's case file.

III. PARTIES' POSITIONS

1. Requestor: No position statement noted.
2. Respondent: Letter dated 9-3-02.
"In review of the additional documentation packet, the (Respondent) found that an erroneous audit was performed for date of service 12/18/01 in the amount of \$344.00. Please be advised that the (Respondent) has requested an immediate re-audit and will

allow reimbursement of \$354.19 (\$344.00 for CPT Code 97750 plus accrued interest) during the week of 09/09/02. An amended response will be submitted with a copy of the payment histories and Explanation of Benefits as evidence of payment to the requestor. The (Respondent) will maintain our denial of date of service 12/19/01 listed on the Table of Disputed Services in the amount of \$48.00, as the documentation submitted does not support the services billed.”

IV. FINDINGS

1. Based on Commission Rule 133.307(d) (1) (2), the only dates of service eligible for review is 12-19-01.
2. The carrier denied the billed service as reflected on the EOB as, “D – Duplicate Charge”; “N11 – Not Documented; Upon review, documentation as submitted does not support the level of service(s) billed”; “O – Upon review of your request for a reconsideration, no additional benefit is recommended at this time.”
3. The following table identifies the disputed services and Medical Review Division's rationale:

DOS	CPT or Revenue CODE	BILLED	PAID	EOB Denial Code(s)	MARS	REFERENCE	RATIONALE:
12-19-02	99213	\$48.00	\$-0-	D,N11,O	\$48.00	MFG; Evaluation/Management Ground Rules (VI); CPT Descriptor	<p>CPT Code 99213 is defined as “Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: an expanded problem focused history; an expanded problem focused examination; medical decision making of low complexity.”</p> <p>The “Medical Progress Notes” did not meet two out of the three required components. This particular CPT Code requires at least one of these two components: an expanded problem focused history or an expanded problem focused examination. The progress note for the date in dispute contained neither of these components. The only component that was met was the decision making of low complexity.</p> <p>Therefore, no reimbursement is recommended.</p>
Totals		\$48.00	\$-0-				The Requestor is not entitled to reimbursement.

The above Findings and Decision are hereby issued this 20th day of December 2002.

Lesia Lenart
Medical Dispute Resolution Officer
Medical Review Division

LL/ll